

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|---------|
| FEES DETERMINATION | ABH | 886 | 4/20/98 |
| O.I.P.E. CLASSIFIER | SAS | 32 | SP/2/98 |
| FORMALITY REVIEW | WJ | 67479 | 5-9-98 |

INDEX OF CLAIMS

| | | |
|------------------------------|---|--------------|
| Rejected | N | Non-elected |
| Allowed | I | Interference |
| — (Through numeral) Canceled | A | Appeal |
| ÷ Restricted | O | Objected |

| Claim | Date |
|----------|----------|
| Final | 01/01/01 |
| Original | 01/01/01 |
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| 29 | N N N N |
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| Claim | Date |
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| Claim | Date |
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| Final | |
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If more than 150 claims or 10 actions
staple additional sheet here